



Board of Zoning Appeals

Town of North Hempstead

210 Plandome Road • Manhasset, NY 11030 • (516) 869-7667 • (516) 869-7812 fax

FILING REQUIREMENTS

RESIDENTIAL - Additions, Alterations, Accessory Buildings; etc.

Section 267-a 5(b) of Town Law requires that any application to the Board of Zoning Appeals shall be filed within sixty (60) days of the Notice of Disapproval by the Building Official.

The following documents are required for all Appeals - Four (4) complete sets:

- Notice of Disapproval - TNH Building Department.
- Application for variance, conditional use permit or a request for determination.
- Copy of Zoning Analysis submission form.
- Environmental Assessment Form
- Survey of premises at original size (plus 1 copy at 8.5"x11" or 11"x17").
- Site Plan, Floor Plans, Elevations & Architectural Drawings at original size (plus 1 copy at 8.5"x11" or 11"x17").
- Mother Daughter information sheet (if applicable).
- **Filing Fees:**
 - Additions & Alterations \$ 200.00
 - Accessory Buildings & Structures, Fences & Swimming Pools \$ 200.00
 - Mother Daughter Residence Permit \$ 200.00
 - Conversion of a single family residence to a two family residence or Additions & alterations to an existing two family. \$ 400.00

INCOMPLETE APPLICATIONS WILL NOT BE ACCEPTED FOR FILING

Town of North Hempstead
BOARD OF ZONING APPEALS
P.O. Box 3000, Manhasset, New York 11030-2327
516 869-7667, fax: 516 869-7812

Application for Variance, Conditional Use or Permit Pursuant to the Provisions of Chapter 70 of the Code of the Town of North Hempstead of 1973 and as Amended

Receipt No. _____ Date _____ Appeal No. _____

Application must be fully completed and will not be accepted unless Affidavit of Ownership
Is executed by the record owner of property described.

By filling this application, the Owner consents to allow the Board of Zoning Appeals to enter upon and inspect the property described.

Applicant Address

Owner: Address

Name and address of Person who will appear for the applicant at the Public Hearing

..... Day time phone #

- Item Application is hereby made for a conditional use or special use under Section(s)
- A Application is hereby made for a variance of Section(s)
- Applications is hereby made for a permit under Section(s)
- Appeal is hereby made for a determination under Chapter 70, Article XXIV, Section..... of the Code of the Town of North Hempstead under the authority vested in the Board of Zoning Appeals.

Subject Premises situated on the *side of (or corner of) Street
..... feet of
(nearest intersection) (town)

Street or House Number:

- B Location: Section Block Lot(s)
- Zoning District

- C To permit the: Erection/Alteration/Conversion/Maintenance/Extension/Use* of

- D Date of attached Building Department's Disapproval

- E Question(s) involved:

- F In connection with: a proposed/or an/Existing - Building Use (circle one)

- G Type of construction: brick/frame/masonry/other Fireproof?

Size of Lot x Feet front feet rear feet depth

Total square feet

- H Size of Existing Building: feet front Feet deep
- Size of Building as Proposed: feet front Feet deep
- Height of Building: existing stories Feet
- Proposed stories

- I Use. Present (or former, if unoccupied)..... proposed
- Is there any petition pending before the Town Board for change of Zone?

1. Give any previous Appeal No(s.) of any previous Applications file on these premises.....
2. How long has owner held title to property?.....
- J 3. Are the Premises within 200 ft. of a school, public library, church, hospital or orphanage?.....
4. Has any Violations being issued affecting the premises?.....
5. Has a Court Summons been served relative to this matter?.....

I hereby submit the principle points on which this application is based with description of existing conditions and proposed work.
 In requesting a variance include a statement concerning your practical difficulty or hardship (attach separate sheet if necessary).

K

I hereby depose and say that all the above statements and information and all statements and information contained in paper submitted herewith are true.

Applicant's Signature _____

Sworn to before me this Day of, 2

(Notary Public)

AFFIDAVIT OF OWNERSHIP

County of Nassau)

State of New York) ss:

..... being duly sworn, deposes and says that he/she resides at
 in the County of and State of

That he/she is (the owner in fee)* (the) of.....

The corporation which is owner in fee)* of the premises described in this application shown on the Nassau County Land & Tax Map as

Section No. Block No. Lot(s).....

that he/she has authorized to make this application * and that the statements of fact contained in this application are true.

Owner's Signature _____

Sworn to before me this day of 2

(Notary Public)



Town of North Hempstead
Department of Building, Safety Inspection and Enforcement
210 Plandome Road, P. O. Box 3000, Manhasset, NY 11030-2327
(516) 869-7660 FAX: (516) 869-7662

Application No.: _____
(Official Use Only)

**RESIDENTIAL ZONING ANALYSIS
SUBMISSION SHEET**

[Required for submission with all Residential Permit Applications.]

Section: _____ Block: _____ Lot(s): _____

Zoning District Classification:	_____	Total Lot Area:	_____ sq. ft.
Max. Permitted Coverage:	_____ sq. ft.	Proposed Coverage:	_____ sq. ft.
Max. Permitted Coverage (%):	_____ %	Proposed Coverage (%):	_____ %
Max. Permitted Gross Floor Area:	_____ sq. ft.	Proposed Gross Floor Area:	_____ sq. ft.
Max. Permitted Gross Floor Area:	_____ %	Proposed Floor Gross Area:	_____ %
Front Yard Required:	_____ ft.	Front Yard Provided:	_____ ft.
Avg. Front Yard (within 200'):	_____ ft.	Front Yard Provided:	_____ ft.
Front Yard Required (Corner Lot):	_____ ft.	Front Yard Required (Corner Lot):	_____ ft.
Min. Side Yard Permitted:	_____ ft.	Side Yard (1) Provided:	_____ ft.
Min. Side Yard Permitted:	_____ ft.	Side Yard (2) Provided:	_____ ft.
Aggregate Side Yard Required:	_____ ft.	Aggregate Side Yard Provided:	_____ ft.
Rear Yard Required:	_____ ft.	Rear Yard Provided:	_____ ft.
Max. Height to Ridge:	_____ ft.	Ridge Height Proposal:	_____ ft.
Max. Height to Eaves:	_____ ft.	Eaves Height Proposed:	_____ ft.

ARCHITECT/ENGINEER: Business / Corporate Name: _____
Last: _____ First: _____ Middle Initial: _____ License #: _____
Street Address: _____ City: _____
State: _____ Zip: _____ Tel. Number: _____ Fax: _____
Email: _____ Cell Number: _____

Architect / Engineer Stamp and Signature MUST appear here.

**TOWN OF NORTH HEMPSTEAD
BOARD OF ZONING APPEALS
SEQR CLASSIFICATION FORM**

APPLICANT NAME: _____

PROPERTY ADDRESS: _____

USE: **RESIDENTIAL** **COMMERCIAL**

NATURE OF PROPOSED WORK:

- Maintenance or repair involving no substantial changes in existing structure or facility
- Replacement, rehabilitation or reconstruction of a structure or facility, in kind, on the same site, including upgrading buildings to meet building or fire codes
- Construction or expansion of a primary or accessory/appurtenant, **non-residential** structure or facility involving less than 4,000 square feet or gross floor area and not involving a change in zoning or a use variance and consistent with local land use controls, but not radio communication or microwave transmission facilities
- Construction or expansion of a single-family, a two-family or a three-family residence on an approved lot
- Construction, expansion or placement of minor accessory/appurtenant residential structures, including garages, carports, patios, decks, swimming pools, tennis courts, satellite dishes, fences, barns, storage sheds or other buildings not changing land use or density
- Granting of individual setback and lot line variances
- Granting of an area variance(s) for a single-family, two-family or three-family residence
- None of the above – **Applicant must complete 617.20 Short Environmental Assessment Form**

DESCRIPTION OF PROPOSED WORK: _____

I, the undersigned, hereby certify that the foregoing statements are true.

(Signature)

(Printed Name)

Date

617.20
Appendix B
Short Environmental Assessment Form

Instructions for Completing

Part 1 - Project Information. The applicant or project sponsor is responsible for the completion of Part 1. Responses become part of the application for approval or funding, are subject to public review, and may be subject to further verification. Complete Part 1 based on information currently available. If additional research or investigation would be needed to fully respond to any item, please answer as thoroughly as possible based on current information.

Complete all items in Part 1. You may also provide any additional information which you believe will be needed by or useful to the lead agency; attach additional pages as necessary to supplement any item.

Part 1 - Project and Sponsor Information				
Name of Action or Project:				
Project Location (describe, and attach a location map):				
Brief Description of Proposed Action:				
Name of Applicant or Sponsor:		Telephone:		
		E-Mail:		
Address:				
City/PO:		State:	Zip Code:	
1. Does the proposed action only involve the legislative adoption of a plan, local law, ordinance, administrative rule, or regulation? If Yes, attach a narrative description of the intent of the proposed action and the environmental resources that may be affected in the municipality and proceed to Part 2. If no, continue to question 2.			NO	YES
2. Does the proposed action require a permit, approval or funding from any other governmental Agency? If Yes, list agency(s) name and permit or approval:			NO	YES
3.a. Total acreage of the site of the proposed action? _____ acres				
b. Total acreage to be physically disturbed? _____ acres				
c. Total acreage (project site and any contiguous properties) owned or controlled by the applicant or project sponsor? _____ acres				
4. Check all land uses that occur on, adjoining and near the proposed action.				
<input type="checkbox"/> Urban <input type="checkbox"/> Rural (non-agriculture) <input type="checkbox"/> Industrial <input type="checkbox"/> Commercial <input type="checkbox"/> Residential (suburban) <input type="checkbox"/> Forest <input type="checkbox"/> Agriculture <input type="checkbox"/> Aquatic <input type="checkbox"/> Other (specify): _____ <input type="checkbox"/> Parkland				

5. Is the proposed action, a. A permitted use under the zoning regulations?	NO	YES	N/A
b. Consistent with the adopted comprehensive plan?			
6. Is the proposed action consistent with the predominant character of the existing built or natural landscape?	NO	YES	
7. Is the site of the proposed action located in, or does it adjoin, a state listed Critical Environmental Area? If Yes, identify: _____ _____	NO	YES	
8. a. Will the proposed action result in a substantial increase in traffic above present levels?	NO	YES	
b. Are public transportation service(s) available at or near the site of the proposed action?			
c. Are any pedestrian accommodations or bicycle routes available on or near site of the proposed action?			
9. Does the proposed action meet or exceed the state energy code requirements? If the proposed action will exceed requirements, describe design features and technologies: _____ _____	NO	YES	
10. Will the proposed action connect to an existing public/private water supply? [If Yes, does the existing system have capacity to provide service? <input type="checkbox"/> NO <input type="checkbox"/> YES] If No, describe method for providing potable water: _____ _____	NO	YES	
11. Will the proposed action connect to existing wastewater utilities? [If Yes, does the existing system have capacity to provide service? <input type="checkbox"/> NO <input type="checkbox"/> YES] If No, describe method for providing wastewater treatment: _____ _____	NO	YES	
12. a. Does the site contain a structure that is listed on either the State or National Register of Historic Places? b. Is the proposed action located in an archeological sensitive area?	NO	YES	
13. a. Does any portion of the site of the proposed action, or lands adjoining the proposed action, contain wetlands or other waterbodies regulated by a federal, state or local agency? b. Would the proposed action physically alter, or encroach into, any existing wetland or waterbody? If Yes, identify the wetland or waterbody and extent of alterations in square feet or acres: _____ _____ _____	NO	YES	
14. Identify the typical habitat types that occur on, or are likely to be found on the project site. Check all that apply: <input type="checkbox"/> Shoreline <input type="checkbox"/> Forest <input type="checkbox"/> Agricultural/grasslands <input type="checkbox"/> Early mid-successional <input type="checkbox"/> Wetland <input type="checkbox"/> Urban <input type="checkbox"/> Suburban			
15. Does the site of the proposed action contain any species of animal, or associated habitats, listed by the State or Federal government as threatened or endangered?	NO	YES	
16. Is the project site located in the 100 year flood plain?	NO	YES	
17. Will the proposed action create storm water discharge, either from point or non-point sources? If Yes, a. Will storm water discharges flow to adjacent properties? <input type="checkbox"/> NO <input type="checkbox"/> YES b. Will storm water discharges be directed to established conveyance systems (runoff and storm drains)? If Yes, briefly describe: <input type="checkbox"/> NO <input type="checkbox"/> YES _____ _____	NO	YES	

18. Does the proposed action include construction or other activities that result in the impoundment of water or other liquids (e.g. retention pond, waste lagoon, dam)? If Yes, explain purpose and size: _____ _____ _____	NO	YES
19. Has the site of the proposed action or an adjoining property been the location of an active or closed solid waste management facility? If Yes, describe: _____ _____ _____	NO	YES
20. Has the site of the proposed action or an adjoining property been the subject of remediation (ongoing or completed) for hazardous waste? If Yes, describe: _____ _____ _____	NO	YES
I AFFIRM THAT THE INFORMATION PROVIDED ABOVE IS TRUE AND ACCURATE TO THE BEST OF MY KNOWLEDGE Applicant/sponsor name: _____ Date: _____ Signature: _____		

Part 2 - Impact Assessment. The Lead Agency is responsible for the completion of Part 2. Answer all of the following questions in Part 2 using the information contained in Part 1 and other materials submitted by the project sponsor or otherwise available to the reviewer. When answering the questions the reviewer should be guided by the concept “Have my responses been reasonable considering the scale and context of the proposed action?”

	No, or small impact may occur	Moderate to large impact may occur
1. Will the proposed action create a material conflict with an adopted land use plan or zoning regulations?		
2. Will the proposed action result in a change in the use or intensity of use of land?		
3. Will the proposed action impair the character or quality of the existing community?		
4. Will the proposed action have an impact on the environmental characteristics that caused the establishment of a Critical Environmental Area (CEA)?		
5. Will the proposed action result in an adverse change in the existing level of traffic or affect existing infrastructure for mass transit, biking or walkway?		
6. Will the proposed action cause an increase in the use of energy and it fails to incorporate reasonably available energy conservation or renewable energy opportunities?		
7. Will the proposed action impact existing: a. public / private water supplies? b. public / private wastewater treatment utilities?		
8. Will the proposed action impair the character or quality of important historic, archaeological, architectural or aesthetic resources?		
9. Will the proposed action result in an adverse change to natural resources (e.g., wetlands, waterbodies, groundwater, air quality, flora and fauna)?		

	No, or small impact may occur	Moderate to large impact may occur
10. Will the proposed action result in an increase in the potential for erosion, flooding or drainage problems?		
11. Will the proposed action create a hazard to environmental resources or human health?		

Part 3 - Determination of significance. The Lead Agency is responsible for the completion of Part 3. For every question in Part 2 that was answered “moderate to large impact may occur”, or if there is a need to explain why a particular element of the proposed action may or will not result in a significant adverse environmental impact, please complete Part 3. Part 3 should, in sufficient detail, identify the impact, including any measures or design elements that have been included by the project sponsor to avoid or reduce impacts. Part 3 should also explain how the lead agency determined that the impact may or will not be significant. Each potential impact should be assessed considering its setting, probability of occurring, duration, irreversibility, geographic scope and magnitude. Also consider the potential for short-term, long-term and cumulative impacts.

- Check this box if you have determined, based on the information and analysis above, and any supporting documentation, that the proposed action may result in one or more potentially large or significant adverse impacts and an environmental impact statement is required.
- Check this box if you have determined, based on the information and analysis above, and any supporting documentation, that the proposed action will not result in any significant adverse environmental impacts.

Name of Lead Agency	Date
Print or Type Name of Responsible Officer in Lead Agency	Title of Responsible Officer
Signature of Responsible Officer in Lead Agency	Signature of Preparer (if different from Responsible Officer)

Board of Zoning Appeals

Town of North Hempstead

RULES FOR FILING OF NOTICE OF A PUBLIC HEARING

- Forms required for notification shall be provided by the Secretary of the Board.
- The applicant shall notify all adjoining property owners as indicated on the latest Nassau County Assessment Roll prepared for the Town General Tax Levy.
- Notices shall be sent not more than twenty (20) nor less than ten (10) days prior to the date of the public hearing. Said notices shall be sent by certified mail, from a Post Office located within Nassau County.
- The applicant shall file with the Office of the Board proof that said notice has been sent to the affected property owners no later than five (5) days prior to the public hearing. Said proof shall consist of: an Affidavit of Mailing, a sample copy of the notice sent and all post office receipts.

- NOTES -

Incomplete Applications will not be accepted for filing!

(over)

NOTICE OF PUBLIC HEARING

PLEASE TAKE NOTICE that a public hearing will be held by the Town of North Hempstead Board of Zoning Appeals on:

Wednesday _____, 20_____, at 10:00 AM in the Town Board Room, Town Hall, 220 Plandome Road, (second floor), Manhasset, N. Y. on the following matter(s):

Appeal Number: _____

Name of Applicant: _____

Address of Property: _____

Section: _____ **Block:** _____ **Lot(s)** _____

Applicable code section(s) _____

Appeal or variance requested _____

All interested persons are invited to appear at said date and time.

For further information, contact:

Applicant name: _____

Address: _____

Telephone/fax: _____

Website/E-mail: _____

Board of Zoning Appeals
Town of North Hempstead

AFFIDAVIT OF MAILING

APPEAL # _____

(Name)....., being duly sworn, deposes and says that on theth day of....., he/she served the NOTICE attached hereto upon the following owners of record of all adjoining properties, as indicated on the latest TNH General Tax Roll, at the address indicated by the depositing same securely enclosed in a postpaid envelope in the post office regularly maintained by the U.S. Government at, in the County of NASSAU, and that said Notice was mailed by certified or registered mail, return receipt requested, which receipt is attached hereto and forms a part hereof.

OWNER/ADDRESS

Section/Block/Lot(s)

.....

.....

.....

.....

.....

.....

.....

[attach additional sheet if necessary]

X _____

Sworn to before me this

.....day of....., 20.....

.....
[Notary]

CONSENT FORM

TO: Board of Zoning Appeals
Town of North Hempstead
P.O. Box 3000
Manhasset, NY 11030-2327

The undersigned, owner of real property,
....., known on the Nassau County Land and Tax Map as
Section, Block, Lot(s).....
.....said property being located adjoining the property of
....., situated at
..... Known of the
Nassau County Land and Tax Map as Section, Block, Lot(s).....
....., have seen and understood the proposed plans on which application
for a variance/conditional use* has been made, and hereby gives his/her* consent for a variance of
Section(s).....
..... of the Code of the Town of North Hempstead in the
construction/use* of

(adjoining property owner's signature)

Sworn to before me this
..... day of, 2.....
.....
(Notary Public)

*strike out inapplicable words

This form may be used in connection with an application for any variance of the Code of the Town of North Hempstead. According to the Rules of the Board, such consents shall be obtained from each owner of property adjoining the subject plot, and if not obtained, Notice of the date and time of hearing shall be sent to such owners of adjoining properties on forms furnished by the Office of the Board.

Consents will not be accepted unless completed with a statement of the variance requested and signatures acknowledged by a notary public. Completed consents must be submitted at least five (5) days prior to public hearing.

FILING REQUIREMENTS FOR MOTHER-DAUGHTER RESIDENCE

- Application to Board of Zoning & Appeals
- Notice of Disapproval issued by the Building Department.
Section 267-a 5(b) of Town Law requires that any application to the Board of Zoning Appeals shall be filed within sixty (60) days of the Notice by the Building Official.
- True and accurate Survey of premises. (4 copies)
- Accurate site plan of premises indicating all off-street parking. (4 copies)
- Accurate current floor plans of the first and second floors of the dwelling. (4 copies)
The submitted drawings shall indicate all room dimensions and the areas of the proposed dwelling units.
- Filing fee of \$200.00. (check made payable to the Town of North Hempstead.)
- Mother Daughter Occupancy information sheet (this form), to include the names, relationship and ages of all occupants of the dwelling.
- Submit Photographs of all occupants of the Mother-Daughter Residence.
- Submit a copy of the most recent recorded Deed to the premises [w/ liber & page].
- Submit copies of all Certificates of Occupancy and Certificates of Completion relating to the subject property.

A Declaration of Restrictive Covenant must be signed by the owners(s) of the premises, if the application is granted. This Declaration will be prepared by the Counsel to the Board. The Declaration shall state that the use of the premises as a mother-daughter residence is limited to the owners(s) of the premises and their immediate family, and that the premises may not be sold as a two-family dwelling.

A Check made payable to the "Nassau County Clerk" to cover the filing fee for recording the Restrictive Covenant with the County of Nassau. The amount of the check should be left blank, with a statement that the check should not exceed fifty (\$50) dollars. In the event the application is denied, this check will be returned to the applicant.

A Consent for Inspection must be signed by the occupants of the premises, if the application is granted, authorizing the Town of North Hempstead to inspect the premises for the purpose of ascertaining whether the premises is being used in compliance with the Mother-Daughter Conditional Use Permit.

Mother-Daughter Residence as defined in the TNH Zoning Code, Section 70-231:

A one-family home or residence altered to include a second kitchen for the sole use by the children or parents of the fee resident owner of said one-family home or residence and for which a conditional use permit shall have been duly approved by the Board of Zoning & Appeals.



Board of Zoning Appeals

Town of North Hempstead

210 Plandome Road • Manhasset, NY 11030 • 516-869-7667 • 516-869-7812 fax

MOTHER- DAUGHTER RESIDENCE

Information Sheet

(Please Print)

OWNERS: _____

ADDRESS: _____

PHONE: _____

Section: _____ Block: _____ Lot(s): _____ Zone: _____

APPLICANT: _____

PHONE: _____

1. The existing one-family dwelling shall be used as a Mother Daughter Residence with occupancy limited to the following named persons:

<u>NAME</u>	<u>RELATIONSHIP</u>	<u>FLOOR</u>	<u>AGE</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

[OVER]